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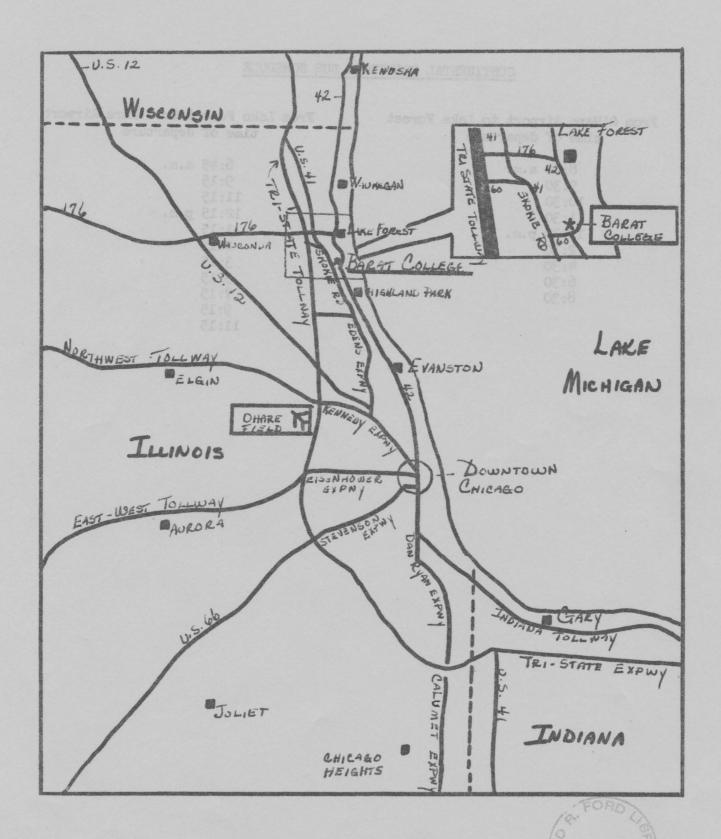
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CONTINENTAL TRANSPORT BUS SCHEDULE

From O'Hare Airport to Lake Forest time of departure

8:30 a.m. 9:30 10:30 11:30 12:30 p.m. 2:30 4:30 6:30 8:30 From Lake Forest to O'Hare Airport time of departure

6:45 a.m.
9:15
11:15
12:15 p.m.
1:15
2:15
3:15
5:15
7:15
9:15
11:15



NATIONAL RIGHT TO LIFE COMMITTEE

P.O. Box 9365 Washington, D.C. 20005

Tel: (202) 638-6235

President
JUAN J. RYAN, Esq.
1351 Springfield Avenue
New Providence, New Jersey 07974
Vice-President
JEROME FRAZEL, Esq.
10036 South Winchester
Chicago, Illinois 60612

July 10, 1970

Dear Friend,

We ask you to fill out the enclosed questionnaire, even if you find it impossible to attend the meeting at Barat College. Please consider the work involved in completing the questions part of your preparation to the meeting. Feel free to add extended comments on the separate pieces of paper.

Please return the questionnaire as soon as possible. We intend to have the results summarized and available for distribution at the opening of our meeting.

The enclosed map will help you locate Barat College (700 Westleigh Rd.). Taxi from O'Hare Airport to the College should cost approximately \$12.00. If you are in a group you might share the ride. A Continental Transport Bus runs directly from the airport to Lake Forest (1 hr. and 15 minutes), at the cost of \$2.00 per person. It would then be a short taxi ride (2 miles) from Lake Forest to Barat College. The schedule for the Continental Transport Bus is listed on the reverse side of the map.

Sincerely yours,

(MR.) MICHAEL TAYLOR

Michael Taylor

Executive Secretary

Enclosure:

NATIONAL RIGHT TO LIFE COMMITTEE

P.O. Box 9365 Washington, D.C. 20005

Tel: (202) 638-6235

President
JUAN J. RYAN, Esq.
1351 Springfield Avenue
New Providence, New Jersey 07974

Vice-President
JEROME FRAZEL, Esq.
10036 South Winchester
Chicago, Illinois 60612

July 2, 1970

Dear Friend:

Enclosed is the agenda for the national meeting of the Right to Life Movement, as was promised in our recent letter. Please fill out the enclosed card and mail it back to us as soon as possible. Again, your attendance is strongly urged.

Shortly, we shall be sending out questionnaires on the major parts of the program.

Sincerely yours,

MICHAEL A. TAYLOR

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Executive Secretary

MT:ms

Enclosure:

FORDUBRARY

NATIONAL MEETING: RIGHT TO LIFE MOVEMENT

Barat College Chicago, Illinois (July 31--August 2, 1970)

AGENDA

FRIDAY, JULY 31, 1970

5:00 p.m.	DINNER
6:00 p.m.	REGISTRATION
8:00 p.m.	WELCOME
8:15 p.m.	OVERVIEW OF DEVELOPMENTS IN 1970
8:30 p.m.	STATE-BY-STATE REPORTS
9:15 p.m.	REPORTS OF SELECT R.T.L. GROUPS
9:45 p.m.	FILM. DISCUSSION
10:00 p.m.	REFRESHMENTS

SATURDAY, AUGUST 1, 1970

"THE ABORTION DECISION"

9:30 a.m.	* Physician has two patients (fetology * Why does a woman need an abortion
10:15 a.m.	IS THERE A PUBLIC HEALTH PROBLEM?
10:45 a.m.	COFFEE BREAK
11:00 a.m.	SOCIAL RESPONSIBILITY OF THE MEDICAL PROFESSION
11:30 a.m.	SMALL GROUP DISCUSSIONS
12:30 p.m.	LUNCH

SATURDAY, AUGUST 1, 1970 (continued)

2:00 p.m.	FUNDAMENTAL CONCEPTS OF AMERICAN LAW RE ABORTION		
2:45 p.m.	WHAT	IS HAPPENING IN THE COURTS?	
3:15 p.m.	COFFEE BREAK		
3:30 p.m.	Two concurrent sessions will be held:		
	1.	ELEMENTS OF A POSITIVE LEGISLATIVE PROGRAM ON BEHALF OF UNBORN CHILI	
	2.	THE LEGAL QUESTIONS INVOLVED IN THE COURT CASE	
5:00 p.m.	BREAL	K	
6:00 p.m.	DINN	TER	
8:00 p.m.	IMPC	* Population Explosion; Government Involvement in Social Questions, Etc.	
9:30 p.m.	FILM		
10:00 p.m.	REFR	ESHMENTS	

SUNDAY, AUGUST 2, 1970

9:30 a.m.	THE PUBLIC RELATIONS PROGRAMS
11:00 a.m.	COFFEE BREAK
11:15 a.m.	FINAL SESSION: STATE & NATIONAL ORGANIZATION
12:30 p.m.	LUNCH. DEPARTURE



NATIONAL RIGHT TO LIFE COMMITTEE NATIONAL MEETING

Barat College Chicago, Illinois July 31--August 2, 1970

FRIDAY, JULY 31, 1970

5:00 p.m.

REGISTRATION

6:00 p.m.

DINNER

8:00 p.m.

WELCOME-OVERVIEW OF DEVELOPMENTS

Mr. Juan Ryan, Esq.

President, National Right to Life Comm.

8:20 p.m.

QUESTIONNAIRE REPORT Mr. Michael Taylor

8:50 p.m.

NRTL POSITION IN RE ORGANIZATION Aims & Purposes - Prospects for the Future - Fr. James T. McHugh

9:10 p.m.

REPORTS OF SELECT GROUPS
Lansing

Minnesota - Mrs. Alice Hartle New Jersey - Rev. Edwin Palmer

9:45 p.m.

FILM "THE COMMITTEE" - DISCUSSION

10:15 p.m.

REFRESHMENTS

SATURDAY, AUGUST 1, 1970

9:30 a.m.

ABORTION DECISION BETWEEN PATIENT & HER PHYSICIAN
Chairman - Dr. Herbert Ratner
Fetology - Dr. Bart Hefferman
Ob.-Gyn. - Dr. Fred Mechlenburg

Statistics - Dr. Denis Cavanagh

10:45 a.m.

COFFEE BREAK



FUNDAMENTAL CONCEPTS OF LAW 11:00 a.m. Child's Right to Life - Jerome Frazel LUNCH LAWOTTAM

12:00 p.m.

WHAT'S HAPPENING IN COURTS 1:30 p.m. Overview of cases - Dennis Horan

SPECIFIC LEGAL ISSUES 1:50 p.m. (9th Amend., etc.) - John Archibold

QUESTIONS 2:10 p.m.

CONCURRENT SESSIONS 2:30 p.m.

> 1. Positive Legislative Program in Support of Maternal Health and Child Development

ETHEMPOLITY OF WHITE CONSTITUTIONAL Question (Lawyers)

Canada

an, Esq. 3:15 p.m. COFFEE BREAK

BACKUP PROGRAMS 3:30 p.m. Birth right - Mrs. Louise Summerhill, Toronto,

IN RE ORGANIZATION BREAK 5:00 p.m.

Fr. James T. McHugh DINNER 6:00 p.m.

8:00 p.m. RELATED ISSUES

Population Control and Abortion - Dr. Ratner "Better not to have a Law" - Rev. William Hunt ersey - Rev. Edwin Palmer

(Fr. Drinan's Position)

Problems for Hospitals - Fr. McHugh

MITTEE" - DISCUSSI 9:30 p.m. FILM "WHOSE RIGHT?"

REFRESHMENTS 10:00 p.m.

SUNDAY, AUGUST 2, 1970

THE GOVERNMENT RELATIONS PROGRAM - Mr. Haley 9:30 a.m.

SION BETWEEN PAT THE PUBLIC RELATIONS PROGRAM - Mr. Haley, 10:15 a.m. Fr. Roache - Dealing with TV & Newspapers, etc.

11:15 a.m. FINAL SESSION: STATE & NATIONAL ORGANIZATION doeseved amount - Feedback from participants

12:30 p.m. LUNCH. DEPARTURE

the two. The old California statute allowed an abortion only to save abortion when necessary to T R E P O R T measurement abortion

edt tedt betste viresio esso Court Cases Tolateld edt al truco ent legislative branch of the government had the authority to promulgate regulations concerning the performance of abortions (but held that it

must do so mone clearly). In contrast, a federal court in Wisconsin

recently brought itself more into line with the policy of the American Within the last two years a movement has developed to challenge the constitutionality of the abortion laws in the various states. Most recently the proponents of repeal have challenged the ALI type law in Colorado. Only one case has come to a conclusion (the Belous case in California), but in that instance the controversy had been mooted by the passage of the new law. At the present time litigations are proceeding in at least 16 states: California, Colorado, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Massachusetts, Michigan, Minnesota, Missouri, New Jersey, South Dakota, Texas, Vermont, Wisconsin. The U.S. Supreme Court has so far accepted appeals on two cases, U.S. v. Vuitch (Washington, D.C.) and Babbitz v. McCann et.al. (Wisconsin). Ultimately the U.S. Supreme Court will probably consolidate several appeals. It is difficult to predict how the court will handle these. It should not be forgotten that whatever action the court takes, it will be very wary of impinging on legislative responsibilities. All efforts on the legislative level must continue.

The following paragraphs are intended as commentary on specific cases and on the legal issues being raised.

right. The court apparently assumed a legislative mentle when Description of Cases for saw adaptatat a visions some redt betate

The United States Constitution, as interpreted by the Supreme Court, guarantees to every citizen the right to be able to reasonably determine when and if he is committing a crime. If the particular law under which an individual stands convicted leaves uncertain the point at which a person crosses the border into criminality, then that law is considered to be "unconstitutionally vague" and incapable of enforcement. It was this constitutional guarantee which was utilized by the California Supreme Court when it reversed the conviction of Dr. Leon Belous, in the latter half of 1969, for conspiring to aid in the procurement of an abortion. Shortly thereafter, a local federal court held that the abortion statute in the District of Columbia was unconstitutionally vague and was, therefore, unenforceable. While both applicate como declared last year that that State's abortion law was

constitutionst and capable of enforcement, Likewise, in Minnerota a

laws were found to be vague, there was a distinct difference between the two. The old California statute allowed an abortion only to save the life of the expectant mother. The Washington law permitted an abortion when necessary to preserve her life or health.

The court in the District of Columbia case clearly stated that the legislative branch of the government had the authority to promulgate regulations concerning the performance of abortions (but held that it must do so more clearly). In contrast, a federal court in Wisconsin recently brought itself more into line with the policy of the American Civil Liberties Union and the Womens' Liberation Movement by declaring that the law has no authority to tell a woman what she may or may not do with her unquickened child. (Quickening usually is viewed as occurring between the fourth and fifth month of the pregnancy). This decision, rendered in March of this year, has been appealed to the United States Supreme Court. For procedural reasons, it is likely that this case will be the first clear-cut test of an abortion law to reach the Court.

Since the decision in Wisconsin, a federal court in Texas has also held that State's abortion statute to be unconstitutional. The Texas court found that the law in that State interfered with the woman's choice to have, or not to have, children, and thus infringed upon fundamental constitutional rights such as marital privacy and fundamental control of one's body.

A lower state court in South Dakota has also declared that State's abortion law to be unconstitutional. The judge adopted the reasoning of the federal court in the Wisconsin case and held that state regulation of abortion was an unconstitutional invasion of individual right. The court apparently assumed a legislative mantle when it also stated that, since society's interests were not served by this particular abortion statute, it should therefore be considered invalid.

None of these decisions, however, is conclusive. Appeals are currently pending in every one except the decision of the California Supreme Court. The United States Supreme Court rejected the appeal of the California Attorney General because, apparently, any decision would be most since the old statute had been superseded by the California Legislature's adoption of a modified ALI abortion law. The National Right-to-Life Committee has encouraged the filing of "friend-of-the-court" briefs in each of these appeals so that the higher courts can be made aware of all the facets of the problem before reaching their decision.

Recent judicial pronouncements have, however, also provided many encouraging indications. In Massachusetts, for instance, an intermediate appelate court declared last year that that State's abortion law was constitutional and capable of enforcement. Likewise, in Minnesota a

federal court recently declared that it had no business passing upon the constitutionality of the State's abortion statute in a criminal abortion prosecution. That prosecution is currently in trial and, last week, the trial court rejected a petition to dismiss on constitutional grounds. In Louisiana recently as well, the state Supreme Court rejected a constitutional challenge to the abortion statute.

Decisions are currently being awaited on a review of a criminal abortion prosecution by the Vermont Supreme Court; as well as on constitutional challenges in federal courts in Illinois and Georgia concerning those states' respective abortion laws. While they have not yet come to trial, constitutional challenges to state abortion legislation have also been filed in federal courts in New Jersey, Colorado, Kentucky, Missouri, and Indiana. All of these challenges contend that the respective laws are vague and that they unduly interfere with the right of a woman to decide whether she wants to bear the particular child she is carrying and with the right of the woman to determine what she wants to do with her own body.

Fundamental Legal Issues

The general trend among the proponents of abortion liberalization has been to concentrate on the judicial as well as the legislative forums. The ultimate goal is to remove the law completely from the area of abortion by having the courts declare that any such regulation is, on its face, unconstitutional. The challenges generally take the position that abortion regulation is an undue interference with the control over one's body, that it effectuates the establishment of the particular moral code of one or more religious sects, and that it interferes with sound medical practice.

Numerous sound legal arguments can, of course, be juxtaposed to those advanced by proponents of abortion liberalization. For instance, the fact that homicide and theft are also proscribed by various religious sects does not render laws against those evils contitutionally infirm. Also, for over two hundred years English and American law has conferred upon the unborn child property rights which tend to view that child as a human being. Likewise tort law, keeping pace with developments in the medical sciences, allows an unborn child to sue for damages inflicted upon him while in the womb; and allows his parents - if that child dies in the womb through the fault of another - to sue the perpetrator of the fault for wrongful death of their child. In addition, at least one state supreme court has held that the right of the unborn child to continued existence takes precedence even over the fundamental right of the parents to the free exercise of their religion.

All in all, the law has consistently established certain procedural safeguards around fundamental rights to which the unborn was entitled. That most fundamental of rights - not to be deprived of life without due process of the law - cannot be ignored.

However, these arguments must be demonstrated to any court considering abortion litigation through the intervention of interested state right-to-life groups. In one federal court challenge to a state abortion statute a doctor was allowed to enter the case as an intervenor on behalf of all unborn children in that state. This enabled his attorneys to offer testimony, call witnesses, cross-examine witnesses called by the other side and engage, as full participants, in the actual controversy involved. In other states lawyers interested in speaking on behalf of the unborn child were allowed to enter the cases as "friends-of-the-court" thus enabling them to submit briefs and memoranda explaining their position to the judges who would finally rule in the particular case. In many states right-to-life groups have retained and/or encouraged interested attorneys to become involved in this litigation.

The general trend among the proponents of abortion liberalization has been to concentrate on the judicial as well as the legislative forume. The ultimate goal is to remove the law completely from the area of

The National Right-to-Life Committee has consistently been ready to provide whatever assistance and information is available to interested parties in this type of litigation. In all but three of the cases discussed earlier, the Committee has become involved in providing the respective attorneys with copies of recent articles and decisions, as well as the results of various research efforts concerning the abortion issue. The judicial problem is not an insoluable one. It is an area in which our various organizations can have a great deal of effect. Contact with the National Committee, and an awareness that local attorneys can exert a great deal of influence in this type of litigation, will help the courts to hear both sides of the argument, and will assist in making them fully aware of the many facets of the problem and the ramifications of their decisions.

Martin F. McKernan, Jr.
National Right-to-Life Committee
Washington, D.C. 20005

<u>FILM RESOURCES</u>

ABORTION

THE COMMITTEE, A film presentation of the Illinois Right to Life Committee, Available from: ACTA, 4848 N. Clark Street, Chicago, Illinois 60640 Purchase Price: \$100.00.

"The Committee" represents a substantial commitment of effort and resources on the part of a group of lawyers, physicians and interested citizens who constitute the Illinois Right to Life Committee. This group, aware of the ultimate implications of totally liberal abortion legislation, decided to pinpoint the issues in a clear and forceful manner for presentation to the general public. They contacted with a professional film company to produce this thoughtful and imaginative presentation.

The producer characterizes "The Committee" as a reflection on abortion and its implications for society. Who - in any society - shall decide who is to live and who is to die? By what norms? These questions are raised in their unique modern context, that is, the new possibilities created by science. In light of the scientific advance, the film focuses on the ethical issues that are part of the continuing discussion about life and death. "The Committee" highlights the issues and stimulates discussion. It should be followed by a panel discussion that will further explore the legal, ethical and social implications of abortion on demand. To this purpose, the Illinois Right to Life Committee has published a discussion manual to accompany the film.

WHOSE LIFE? is an original drama by Harding LeMay about abortion and the problems which arise when a wife and mother decides that she does not want any more children. Well done. Originally produced by NBC-TV for its Sunday morning "Guideline" series. 26 minutes. Black and White. 16mm. Write to: National Catholic Office for Radio and Television, The Chrysler Building, New York, New York 10017. Purchase price: \$144.00. Rental \$15.00 per day and \$30.00 per week.

LIFE BEFORE BIRTH (PART II). A Life filmstirp (#252) which presents photos of fetal development from implantation to birth, accompanied by excellent commentary. Color. 88 frames. Write to: Life Educational Program, Box 834, Radio City Station, New York, New York 10019. Cost: \$7.00.

THE RIGHT TO LIFE. A film strip, narrated by Loretta Young, which responds to the arguments advocated in favor of liberalization of the abortion laws. 25 minutes. Write to: The Roper Co., 8609 N. W. Plaza Drive, Dallas, Texas 75225. Cost \$18.54.

IS ABORTION A RIGHT? A factual panel presentation opposing reform or repeal of abortion legislation with Mrs. Valerie Dillon (noted sex education author), Robert Byrn of Fordham Law School and member of Governor Rockefeller's commission to review abortion legislation, and Dr. Frank Ayd (Baltimore psychiatrist). The material presented is accurate and substantial. 30 minutes. Black and White. 16mm. Write to: Right to Life Committee 32 E. 51st Street, New York, New York 10022. Purchase only: \$100.00.

INDICATIONS FOR A THERAPEUTIC ABORTION. An open panel discussion. The moderator is the Hon. Richard Lamm, Attorney and State Legislator from Colorado. Panelists: Allan F. Guttmacher, M. D., President of Planned Parenthood and World Population; Frank J. Ayd, Jr., M. D. 31 minutes. Black and White. 16mm. Order by title and number (T-1720). Write to: National Medical Audio-Visual Center (Annex), Station K, Atlanta, Georgia 30324. The film should be requested at least three weeks before the preferred showing date; if possible, two alternate showing dates should be given. Free on request.

ABORTION AND THE LAW. A documentary that deals with the social, economic, medical, moral and legal viewpoints about abortion. Includes interviews with women who had abortions, Roman Catholic and Protestant clergymen, doctors and lawyers. Examines attitudes and laws concerning abortion in other countries. Originally produced by CBS-TV (1964), 52 minutes. Black and White. 16mm. The format is attractive for educational purposes, but teacher or discussion leader should review contents beforehand. Some statistics are weak and much information is dated. At points it implies that abortion laws are based on particular religious beliefs. For purchase write to: Carousel Films, 1501 Broadway, Suite 1503, New York, New York 10036. Cost: \$250.00. For rental write Carousel Films for local distributor. Fee: approximately \$15-20.

VISUAL AID RESOURCES

"Life Before Birth" - a Life Reprint (#27): Lennart Nilsson's famous pictures and text that trace the human embryo from fertilization to 28 weeks' development. Write to: Life Education Program, Box 834, Radio City Station, New York, New York 10019. Cost: 75ϕ each for the first 20 copies and 25ϕ each for additional copies.

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ABORTION

Basic Reading and Resources

- Abortion in the United States. (ed) Mary S. Calderone, M. D. New York:

 Hoeber-Harper, 1958 (currently out of print). This is a report
 of the conference held in 1958 to gather factual information on
 the nature and extent of illegal abortion and its relationship
 to therapeutic abortion. A good overall picture as of 1958.
- Abortion and the Law. (ed) David Smith. Cleveland: Western Reserve
 University Press, 1967. A compilation of papers by doctors
 and lawyers that appeared as a symposium in the December, 1965
 Western Reserve Law Review. Very good for overview of the problem.
- The Terrible Choice: The Abortion Dilemma. (ed) Robert E. Cooke, M. D. et. al. New York: Bantam Books, 1968. Includes various scholarly papers presented at the International Symposium on Abortion. Although detailed with the current scientific findings, the articles are set forth in a popular tone. A valuable source of information.
- Quay, Eugene. "Justifiable Abortion: Medical and Legal Foundations,"

 The Georgetown Law Journal, Vol. 49, Nos. 2 and 3 (Winter '60-Spring '61), 173-256, 395-538.
- An Annotated Bibliography of Induced Abortion. (ed.) Gunnar K. af Geijerstam, M. D. Center for Population Planning, 1225 S. University Avenue, University of Michigan, Ann Arbor, Michigan 48104, 1969. 359 pp. Paper. 1175 items listed. Comprehensive regarding topics and countries.

New Studies

Callahan, Daniel. Abortion: Law, Choice and Morality. New York: Collier-MacMillan, 1970. \$14.95. On the basis of vast resources a noted moralist presents a creative analysis of the abortion question from a world-wide perspective. Because of the methodology employed by the author, the book requires a complete reading before it can be adequately understood and criticized.

- Grisez, Germaine. Abortion: the Myths, the Realities, and the Arguments. Cleveland: Corpus Instrumentorum, Sept. 1970. Paper: \$6.95. Hardback: \$15.00. A comprehensive account of all aspects of the abortion question: medical, biological, religious, sociological, ethical and legal. John R. Connery, S. J. in the March issue of Theological Studies: "I would not hesitate to recommend this book to anyone interested in becoming knowledgeable in this area." (176)
- Noonan, John T., Jr. The Morality of Abortion: Legal and Historical Perspectives. Cambridge, Mass: Harvard University Press, Sept. 1970. \$8.96. Seven scholars probe some very necessary moral and legal issues of the continuing abortion controversy and generally conclude that unrestricted abortion is wrong. The editor has contributed an article entitled "An Almost Absolute Value in History" and has collaborated with David W. Louisell, also Professor of Law at the University of California, Berkeley, on "Constitutional Balance". "Reference Points in Deciding about Abortion" and "A Protestant Ethical Approach" have been contributed by Paul Ramsey and James M. Gustafson, Professor of Chirstian Ethics at Princeton and Yale, respectively. Harvard's Hollis Professor of Divinity, George Huntston Williams has written "Sacred Condominium". John M. Finnis, Professor lof Law, University College, Oxford, has contributed "Three Schemes of Regulation"; and Bernard Haring, CSSR, Professor of Moral Theology, Academia Alfonsiana, Rome, has written "A Theological Evaluation." Of these recent studies this one may well be the most significant and useful.
- Theological Studies, Vol. 31 (March, 1970). Seven noted authors participate in this symposium on abortion. The first two articles, that by Andre E. Hellegers, M. D., "Fetal Developments", and that by George H. Williams, "Religious Residues and Presuppositions in the American Debate on Abortion", are of exceptional worth. The first section of Williams' article, an historical study of the faith traditions, is recommended reading.

New Publications

- Let Us Be Born: the Inhumanity of Abortion. By Robert E. and Mary R. Joyce.

 With Foreward by Juan J. Ryan, Esq. President, National Right to
 Life Committee. Chicago: Franciscan Herald Press, 1970. Paper:
 \$1.95. The authors seek to bring the deeper issues of the abortion question before a broad audience. Their presentation is readable, honest, and challenging.
- Child and Family "The Case Against Abortion" (reprint of Winter 1968 issue). This excellent reprint presents five experts who challenge the position of the proponents of abortion: Herbert Ratner, M. D., "A Public Health Physician Views Abortion"; Eugene F. Diamond, M. D., "A Pediatrician Views Abortion"; Sister Mary Patricia, "A Mental Health Expert Views Abortion"; Dr. Immanuel Jakobovits, Head Rabbi of England, "Jewish Views on Abortion"; Rev. Charles Carroll, Protestant Chaplain, University of California, San Francisco Medical Center, "Liberalized Abortion A Critique". This booklet is ideal for distribution in quantity. Single copies: \$1.00. Bulk rates: 5 or more 80¢ each; 10 or more 70¢ each: 25 or more 60¢ each; 50 or more 50¢ each. Write to: Child and Family, Box 508, Oak Park, Illinois 60303.

25 or more - 60ϕ each; 50 or more - 50ϕ each. Write to: Child and Family, Box 508, Oak Park, Illinois 60303

Life Educational Reprints

- "Life Before Birth" (#27) Lennart Nilsson's famous pictures, with text, that trace the human embryo from fertilization to 28 weeks development.
- "The Moment Life Begins" (#53) A clear and detailed study of human conception. With full-color photographs of the developing egg, the reprint examines the genetic processes that make every human being unique. A second section reports on future possibilities of research already underway: mechanical placentas, cold-storage embryos for long space travel, and replication of an entire organism from a single cell.

Write to: Life Education Program, Box 834, Radio City Station, New York, New York 10019. Cost: 75ϕ for each for the first copies and 25ϕ each for additional copies.

Books and Articles

- Augenstein, Leroy. "It's Later Than We Think", Ecumenist (March-April 1969), 41-43. A biophysicist probes the new value questions that science is raising for man.
- Cavanagh, Denis, M. D. "Reforming the Abortion Laws: A Doctor Looks at the Case", America (April 18, 1970), 406-411.
- Connery, John R. "Law and Conscience", America (Feb. 21, 1970), 178-181.

 Includes a discussion of the conscience clause in abortion laws.
- Diamond, James J., M. D. "Humanizing the Abortion Debate", America (July 19, 1969), 36-39.
- Granfield, David. The Abortion Decision. New York: Doubleday, 1969.
- Kindregan, Charles. Abortion, the Law, and Defective Children: A Legal-Medical Study. Cleveland: Corpus Instrumentorum, 1969.
- Liley, H. M. I. Modern Motherhood: Pregnancy, Childbirth, and the Newborn Baby. Foreward by Virginia Apgar. New York: Random House, 1969 (rev.)
- McDonagh, Edna. "Ethical Problems in Abortion", Irish Theological Quarter ly 35 (1968), 269-72.

- Noonan, John T., Jr. "The Constitutionality of the Regulation of Abortion"

 The Hastings Law Journal (Nov.1969), Vol. 21, No. 1, 51-65. A

 summary of fundamental legal aspects of the abortion question.
- . "Amendment of the Abortion Law: Relevant Data and Judicial Opinion", The Catholic Lawyer (Spring, 1969), Vol. 15, 124-135.
- Potter, Ralph B., Jr. "The Abortion Debate", in <u>Updating Life and Death</u>, (ed.) Donald R. Cutler. (Boston: Beacon Press, 1968), 85-135. There are other significant articles in this book which relate to the abortion question.
- Quinn, F. X. (ed). <u>Population Ethics</u>. Cleveland: Corpus Instrumentorum, 1968.
- Shaw, Russell. Abortion on Trial. Dayton: Pflaum, 1968 (out of print).
- Stevas, Norman St. John. <u>Life, Death, and the Law</u>. Indiana University Press, 1961
- Vaux, Kenneth (ed) Who Shall Live?, Philadelphia: Fortress Press. 1970.
- Wattenberg, Ben. "The Nonsense Explosion", The New Republic (April 4-11, 1970), 18-23.

The amicus briefs of Dr. Bart Heffernan (Illinois) and of Dr. William Colliton (Washington, D. C.) in the case <u>U. S. v. Vuitch</u> contain extended and detailed bibliographies in the areas of law and medicine.

*

If one cares to obtain materials recommended by the proponents of abortion, write to: Association for the Study of Abortion, 120 West 57th St., New York, New York 10019. For current information of the activities of abortion advocates, read the AMA NEWS (The AMA NEWS, American Medical Association, 535 N. Dearborn Street, Chicago, Illinois 60610 - \$10 per year) and the OB. GYN. NEWS (4907 Cordell Avenue, Washington, D. C. 20014 - \$18 per year.)

ABORTION

Printed Materials - Pricelist*

The National Right to Life Committee issues a monthly <u>Newsletter</u> which reports recent trends and activities in abortion <u>legislation</u> and notes worthwhile publications on abortion. Write: National Right to Life Committee, P.O. Box 9365, Washington, D.C. 20005.

Books

- The Terrible Choice: The Abortion Dilemma a report on the various scholarly papers presented at the International Symposium on Abortion. Price 95ϕ
- Abortion Decision by David Granfield. Presents alternative remedies for those social ills which legalized abortions purportedly will cure. Doubleday, Garden City, NY 11531. Price \$5.95.

Pamphlets

- "Abortion on Demand" by Russell Shaw. Small size booklet which can be obtained from the National Right to Life Committee. Sample copy free upon request. Bulk price - \$10 per 100.
- "Amendment of the Abortion Law: Relevant Data and Judicial Opinion" by John T. Noonan, Jr. A review of several problem areas in the abortion controversy: the historical development in law regarding the unborn child's right to life; the meaning of statistical data on deaths from abortions; status of medical research on the child in the womb. National Right to Life Committee. Price 15¢@; \$12 per 100.



- "Questions and Answers on Abortion" National Right to Life Committee.

 Price \$5 per 100.
- "When Pregnancy Means Heartbreak...Is Abortion the Answer?" by Eunice Kennedy Shriver. A thoughtful discussion of the fundamental values of the abortion. Price 15¢@; \$12 per 100.
- "Abortion, the Law and the Common Good" by Andre E. Hellegers, MD. With thought and insight Dr. Hellegers responds to the most commonly raised arguments for liberalization of the abortion laws. Price $15\phi@$; \$10 per 100.
- "Abortion: Some Theological and Sociological Perspectives" by Rev. James T. McHugh. Includes a discussion of the ethical and theological dimensions of this debate in our society. Family Life Division, USCC. Price $15\phi@$; \$9 per 100.

"Abortion on Demand" - by Russell Shaw, Small size bookiet which can

*All these materials can be purchased through the National Right to Life Committee, P.O. Box 9365, Washington, D.C. 20005. Tel: (202) 638-6235

PUBLIC RELATIONS

INTRODUCTION

When we speak of a public relations program in regard to the liberalization of abortion laws, we must begin with the realization that we are not challenging the present laws in most states, but we are waging a campaign against an organized effort to totally repeal or liberalize those laws.

The first and overriding responsibility of such a P.R. program is to provide as much accurate information as possible. This requires obtaining such information from the disciplines of law, medicine, social sciences and religion, and presenting it in a fashion that will have some meaning for the man in the street. It also demands an understanding of what those who propose repealing or changing the laws are saying, and some idea of how much public support they have for their position.

Since the discussion usually involves a proposal to change the present law as suggested by the American Law Institute's Model Penal Code, a thorough understanding of that model statute is indispensible. The necessity for change is most often based on a recitation of the increasing incidence of abortion, accompanied by very general or vague statistics. It is therefore necessary to start with verifiable statistics, to break them down and analyze them clearly.

NOT discussions, a phone-call campaign, organization of neighborhood

It is also necessary for a Right to Life Committee to develop short, precise position papers on the medical, legal and religious aspects of the problem. It is also important for all to understand the proper way to carry the program to the legislature.

Following are some specific suggestions that should be followed quite carefully:

- (1) Look for cooperation from other groups and from individuals. It's important to realize that others may be opposed to the repeal of all abortion laws, but not so strongly opposed to some modifications. It is important to know what type of modification they will accept and what they will reject. It is important also to spell out the immediate implications of a relaxed law, and to analyze what might be expected in future years to extend the present liberalization. This leads to considering specific qualifications or safeguards. It may also persuade some people that modification cannot be effected without too great a danger of total repeal or irnoring of the law.
 - (2) A public information program requires the use of the media--radio,

 TV, newspapers--and also the personal approach through public meetings

 and discussions, a phone-call campaign, organization of neighborhood

someone beforehand by a phone call, or follow up the delivery with a

groups, etc. Any of these attempts presumes a basic decision by the ro rottle edit or drop a drop a

your contact in reference to your story, and occasionally in

- (3) Dealing with Newspapers: The local newspaper is interested in printing the news of organized groups; policy decisions of existing organ-vious of the substance of a news story. In attempting to obtain a copy of the text or a typed summary of the speech.

 news coverage, the following procedures should be observed:
- (g) When you report a resolution of a group, it should be typed this state of the count and the should be typed out and, if possible, the vote count should be indicated.

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 - include the names of persons who may be contacted—usually the include the names of persons who may be contacted—usually the background on perspectives.

 Publicity Chairman.

 Continual editoralizing on one side of the issue or a
- (c) Be attentive to details, present them clearly. Who said what,
 - an opposing view. It's the Publicity Chairman's job to (d) Type all news releases, double-spaced, and with wide margins. get someone to do such an article, and present it to the

editor for consideration.

National Right to Life Committee P.O. Box 9365 Washington, D.C. 20005 groups, etc. Any of these attempts presumes a basic decision by the

(e) Deliver the release to the newspaper office, and either alert someone beforehand by a phone call, or follow up the delivery with a call.

NB: Read the papers regularly, call or drop a note to the editor or your contact in reference to your story, and occasionally in

reference to other stories in the same area of interest.

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 (f) Whenever you report a speech by a specialist, try to supply niation of gnizaments at vivota awen a to constatus est est anotaix a copy of the text or a typed summary of the speech.

 They reado est blueds serve procedure and world they represent the specialist.
- be typed (g) When you report a resolution of a group, it should be typed (a) Select a Publicity Chairman who establishes contacts with out and if possible, the vote count should be indicated.

 Gettors of local papers and with broadcast personnel. Keep a record
 - for a reaction, usually by way of a Letter to the Editor.
 - . i Editorial enument interlaced with a news account.

 (b) Establish a format for a news release, set it up clearly, and
 - ii. Improper use of statistics in attempting to provide include the names of persons who may be contacted—usually the background on perspectives.
 - iii. Continual editoralizing on one side of the issue or a
 - (c) Be attentivebis eno no elastiv. Who said what,
- an opposing view. It's the Publicity Chairman's job to get someone to do such an article, and present it to the editor for consideration.

National Right to Life Committee P.O. Box 9365 Washington, D.C. 20005

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Figures Tell Another Story

It's Time to Defuse Population 'Explosionists'

By Thomas C. Jermann

Americans have been overwhelmed by an avalanche of scare rhetoric about the "population explosion." We have been assured that it is not only the greatest problem facing the world, but also our greatest problem.

The rhetoric goes something like this: If growth rates continue unchecked, in 600 years there will be one person for every square yard of the earth's surface. In 900 years a building 2,000 stories high covering the whole world will be needed to house the immense throng. The exploding U.S. population will keep pace: 375,000,000 Americans by A.D. 2000., 939,000,000 by 2050, and 2,350,000,000 by 2100.

Birth Rate Declines

Explosionists advocate unprecedented measures to stem the force of this impending tidal wave of humanity. Suggested solutions for the United States range from tax disincentives to nearly unlimited abortion and eventual government control.

All of this is in the face of a steadily declining birth rate in the United States. The birth rate and the number of babies born each year from 1957 to the present are:

Year	Births	Rate
1957		25.3
1958	4,255,000	24.5
1959	4,295,000	24.3
1960	4,257,850	23.7
1961	4,268,326	23.3
1962	4,167,362	22.4
1963	4,098,020	21.7
1964	4,027,490	21.0
1965		19.4
1966	3,606,274	18.4
1967		17.8
1968		17.4
1		

The birth rate has declined every year from a high of 25.3 per 1,000 in 1957 to a low of 17.4 in 1968. The latter figure is the lowest in U.S. history.

The death rate, at 9.6, has remained almost unchanged in the last 20 years. As our population grows older (which is beginning to occur in consequence of the smaller number of babies born each year) the death rate must eventually rise to 15 in accordance with our life expectancy of 70 years.

(If, in the face of the declining birth rate, the death rate remained at 9.6 permanently, everyone could expect to live to be 104 years old.)

An Overcapacity

A total of 800,000 fewer babies were born in 1963 than in 1961. The consequences of this have not yet been fully appreciated, but these figures mean that in 1976 there will be 800,000 fewer third-graders in the nation's classrooms than there are today. This is not a hazy prognostication, because these children have already been born. There will be an overcapacity in teachers, schools, and educational facilities.

Dr. Jermann is a professor of history at Rockhurst College, Kansas City, Mo. This essay originally appeared in the Kansas City Times.

In view of these declining numbers and the recent record-low birth rates, it is probable that the U.S. population is already moving toward stabilization. It has become apparent that the Census Bureau's 1967 population estimates for the year 2000 are already outdated and must be revised sharply downward.

These estimates varied from a high of 398,000,000, to an intermediate range between 336,000,000 and 308,000,000, to a low of 283,000,000. The high and the intermediate estimates now seem to be completely

out of the question; even the low estimate may be too high. Some demographers now think that the U.S. population will stabilize around the year 2000 at 245,000,000 to 265,000,000.

Extending Too Far

The impact made by the explosionists results partly from their extending trends far into the future. Such lengthy extensions are invalid, for they assume that all population factors will remain constant. Since population factors have a way of not remaining constant, the longer a "trend" is extended, the greater is the likelihood of error.

It is possible, moreover, even with the use of reasonably short extensions, to achieve forecasts that contradict those of the explosionists. One can note, for example, the "trend" in the U.S. birth rate from 25.3 in 1957 to 17.4 in 1968. If this "trend" is extended only 22 years into the future, the birth rate will be down to zero.

Similarly, the birth rate declined steadily from 30.1 in 1910 to 18.4 in 1936. If in 1936 this "trend" had been extended only 39 years into the future, births in the United States would have ceased altogether by 1975. This is not only invalid, but ridiculous. Such procedure is, however, not nearly as ridiculous as extrapolations that are mechanically extended for 600 or 900 years.

The chief danger, however, in the scare rhetoric of alarmists is that they tend to reduce many of our major problems to numbers of people. They thus divert attention away from the actual causes of the problems. To the extent that the distortions and half-truths find credence, they will retard much-needed solutions.

Crimes and Crowds

The ever-increasing rates of violent crime are attributed to population growth and density. If crowded conditions cause crime, the most crowded areas of the world might legitimately be expected to have the highest crime rates.

Holland, for example, where people are crowded together at a density of almost 1,000 per square mile (compared with 57 per square mile in the United States), should be a very dangerous place indeed. The Dutch, however, who have one of the lower crime rates in the Western world, seem to be unaware of their predicament. Perhaps they have not yet read such books as Paul Ehrlich's Population Bomb.

To take another example, Great Britain has 50,000,000 people crowded into an area smaller than California. On the basis of the explosionists' rhetoric it is hard to understand why there are fewer murders in the entire British Isles every year than there are in Chicago or Cleveland, or greater Kansas City. These examples suggest that population density, in itself, does not produce crime.

Hindering Reforms

There is danger, however, that irresponsible scare tactics may divert public attention to mere numbers of people. Progress in eliminating slums may be re-

tarded, increased educational and vocational assistance may be delayed, and much-needed reforms in prisons and courts may not be undertaken.

Another favorite theme of the explosionists is environmental pollution. This is, of course, a problem of paramount importance. It cannot, however, be reduced to mere numbers of people. Although more people produce more pollution, they also produce the wealth and the technology to combat it. The crucial factor is determination. Alarmists, by directing attention solely to numbers of people, tend to obscure the fact, admittedly unpleasant, that combating pollution requires large sums of money.

Oversimplification is heard even from government officials. Robert H. Finch, former Secretary of Health, Education, and Welfare, when asked what people could do on a voluntary basis to improve the environment, said: "I would begin by recommending that they start by having only two children."

This is not the heart of the problem. If population growth in the United States ceases today, rivers will remain ecological slums, and air over some cities will remain unbreathable until massive and costly efforts are undertaken to remedy these deplorable conditions. To the extent that environmental problems are obscured by simplistic rhetoric, they will continue to go unresolved.

CONTINUED ON PAGE 2

NEW YORK TIMES 7/26/70

1,190 Abortions in 23 Days Reported by City Hospitals

The Health and Hospital Corporation reported yesterday that 1,190 abortions had been performed in the city's municipal nospitals between July 1

THE EVENING STAR A-11 Washington, D. C. wednesday, July 22, 1970 N.Y. Says 3 Died After Abortions

NEW YORK (AP) — Three deaths among the more than 2,000 women who have had abortions in the city since the law was eased on July 1 were revealed yesterday.

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Contributions to this report are

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Atlanta, Coorgia 30333

ABORTION SURVEILLANCE REPORT

Hospital Abortions

Annual Summary 1969

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- I. Summary
- II. Introduction
- III. Definitions
- IV. Hospital Reports
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- VI. Legal Notes
- VII. Comments
- VIII. International Notes

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service, Health Services and Mental Health Administration
National Communicable Disease Center
Epidemiology Program, Family Planning Evaluation Activity
Atlanta, Georgia 30333



Preface

This report summarizes information received from state health departments, university hospitals, and other pertinent sources, domestic and foreign. It is intended primarily for the use of those with responsibility for family planning evaluation and hospital abortion planning.

Contributions to this report are most welcome. Please Address:

National Communicable Disease Center
Attn: Chief, Family Planning Evaluation Activity
Epidemiology Program
Atlanta, Georgia 30333

National Communicable Disease Center......David J. Sencer, M.D., Director Epidemiology Program......Alexander D. Langmuir, M.D., Director Family Planning Evaluation Activity....Carl W. Tyler, Jr., M.D., Chief John D. Asher, M.D., Abortion Surveillance Officer

I. SUMMARY

dence, prevalence, morbidity, and mortality data. This report summarizes hospital abortion reports from five selected hospitals and four state health departments. For clarity a list of basic definitions is included. All states reporting show increasing hospital abortion activity. In 1969 five states passed new abortion legislation, and 24 other states considered new bills. All reports suggest that attitudes as well as laws are major determinants of abortion practices, and they are changing. An international report from England and Wales indicates widespread acceptance and implementation of the Abortion Act of 1967 both in National Health Service and in private hospitals.

II. INTRODUCTION

Abortion surveillance developed out of a need for data on this important form of fertility control in this country. The incidence and prevalence of induced abortion in the United States are unknown. Abortion-related morbidity is also unknown and mortality is under-reported, perhaps by as much as 50 percent. In 1966 the National Center for Health Statistics reported 189 maternal deaths associated with the complications of abortion. Those deaths represent 18 percent of all maternal deaths for that year, the leading single cause of maternal mortality.

This report deals with hospital abortions reported from various areas of the country in 1969. Colorado was the first state, in 1967, to alter its abortion law substantially*; by the end of 1969 10 other states had passed new abortion legislation. In the three states (California, Colorado, and Georgia) with available data, steadily increasing numbers of abortions have been performed in hospitals since enactment of the new laws. It will be important to follow these early trends in future reports.

To meet the increasing need for hospital abortion care some medical centers are already engaged in planning new forms of delivery of this health service. Projecting future needs accurately depends upon the collection of surveillance data on a nationwide basis. The rapid analysis of this information and its ready availability to state health departments, departments of obstetrics and gynecology, and other interested parties will make it useful for hospital, state, and national planning.

If rational decisions about the complex relationships between hospital abortion and non-hospital abortion, contraceptive usage, and changes in U.S. fertility rates are to be made, it will be essential to include information from as many states and hospitals as possible in future years.

^{*} Mississippi altered its existing abortion law in 1966 by adding rape as an indication for hospital abortion.

III. DEFINITIONS

Abortion: "the termination of a pregnancy at any time before the fetus has attained a stage of viability." This definition includes both spontaneous and induced abortions; however, as used in this report, the term abortion will always mean hospital abortion only.

Hospital Abortion: An abortion induced in a hospital or hospital facility by the authority of and under the conditions stipulated by the state abortion law. The term "therapeutic abortion" came into use when almost all hospital, or legally induced, abortions were done to "preserve or protect the life of the mother." With broader indications for hospital abortions, the term "therapeutic" has become less applicable in its former narrow sense.

Hospital Abortion Ratio: The hospital abortion ratio is the number of hospital abortions per 1,000 live births. When the denominator is expressed as total births, or when data used are provisional or from the preceeding year, this is specified in a footnote.

Marital Status:

Married: Any woman married at the time of abortion.

Unmarried: Any woman never married, separated, widowed, or divorced at the time of abortion.

IV. HOSPITAL REPORTS

Hospital reports are now being collected from five selected institutions, representing three parts of the country. Included are three public hospitals, one private hospital, and one hospital serving both ward and private patients.

Table 1 shows the hospital abortion ratios for these five institutions. University Hospital of New York, a private institution, reported 71 abortions per 1,000 live births. Bellevue, a public hospital affiliated with the same medical school, reported 45 abortions per 1,000 live births, which was nine times as many abortions on a proportional basis as reported by Grady Memorial in Atlanta, also a publicly supported, university-affiliated hospital. The Johns Hopkins Hospital, serving both private and ward patients, reported the highest ratio, 516 abortions per 1,000 total births.

Indications for hospital abortions are shown in Table 2, which includes data from two public hospitals, one private hospital, and one hospital seeing both private and ward patients. Maternal mental health was the commonest indication for all hospitals, accounting for 93.7 percent of all cases. Two of the eight abortions performed for fetal indications at University Hospital were the first reported because of rubella vaccine immunizations early in pregnancy.

V. STATE REPORTS

The ratios of abortions to live births in four of the five states that passed new laws in 1967 and 1968 are shown in Table 3. California, with 35 hospital abortions per 1,000 live births in the first three quarters of calendar year 1969, shows a 2.1/2-fold increase over the 14 hospital abortions per 1,000 live births done in the year immediately following law

*

revision.⁵ The 25 hospital abortions per 1,000 live births in Colorado represents a twofold increase from the 12 hospital abortions per 1,000 live births done in the first year after enactment of their new law.⁶ Georgia also reported a higher ratio (2 abortions) in 1969, compared with the 8 months in 1968 following have revision when the ratio was 1 abortion per 1,000 live births.⁷

Indications for abortions in these four states show that the majority (90.6 percent) of hospital abortions were carried out for maternal mental health indications. By examining Tables 3 and 4 together it can be seen that the two states with the highest ratios of hospital abortions performed also

had the greatest percentage carried out for mental health reasons.

Age breakdown (Table 5) indicates that in three selected states large proportions of very young women received abortions in 1969. In all states at least one-fourth of the patients were age 19 or younger. More cases fell in the 15-19 year age group than in the highly fertile 25-29 group.

In the three states reporting marital status, more unmarried women than

married women received hospital abortions (Table 6).

VI. LEGAL NOTES

In 1969, 29 states considered new abortion legislation. Five of these states -- Arkansas, Delaware, Kansas, New Mexico, and Oregon -- passed new laws. Oregon became the first state to follow the recommendation of the American College of Obstetrics and Gynecology, which makes the following allowance: "In determining whether or not there is substantial risk (to the woman's physical or mental health), account may be taken of the mother's total environment, actual or reasonably foreseeable."8 The other four states enacted laws based on the American Law Institute Model Penal Code: "A licensed physician is justified in terminating a pregnancy if he believes there is substantial risk that continuance of the pregnancy would gravely impair the physical or mental health of the mother or that the child would be born with grave physical or mental defect, or that the pregnancy resulted from rape, incest, or other felonious intercourse. All illicit intercourse with a girl below the age of 16 shall be deemed felonious for purposes of this subsection."9 These newly enacted laws were similar to those already passed by California, Colorado, Georgia, Maryland, and North Carolina in 1967 and 1968.

Ten of 11 new state laws include possible danger to the mother's life as an indication for abortion, 10 include threat to physical or mental health as an indication, and nine permit abortion for fetal indications. All 11 state laws permit abortion if forcible rape took place, incest is included as an

indication in nine states, and statutory rape in seven states.

Five states place upper limits on the gestational time period during which abortions may be performed. These limits range from 16 to 26 weeks. Committee action and/or consultation by other physicians is required by all but one. Residency requirements are specified by five states. 10

(See Appendix A)

VII. COMMENTS

Data from the selected U.S. hospitals and states show that hospital abortion practices have changed greatly and vary widely in different regions of the country. It has been estimated that approximately 8,000 abortions a year were

done in U.S. hospitals in the years 1963-1965; 11 in the first three quarters of 1969 one state--California--reported over 9,000 abortions.

Hall in 1965 surveyed 60 American hospitals and documented the much] 1965 higher abortion ratio for private patients than for ward patients. In these hospitals (which accounted for 522,578 deliveries in the time period studied), the ratio of induced abortions to 1,000 deliveries was one for ward patients and three for private patients. In 1969, the three public hospitals shown in Table 1 reported 37 abortions per 1,000 live births. In the period 1957-1961 the Johns Hopkins Hospital (ward and private) performed three abortions per 1,000 deliveries; the 1969 figures show nearly a 200-fold increase to 516 abortions per 1,000 deliveries.

Hospital abortion activity in these selected institutions and states do not correlate directly with recent legislative changes. New York is acting under an abortion law passed in 1828, which permits abortion only to "preserve the life of such female." The Georgia law, passed in 1968 and based on the ALT Model Penal Code, is broader than the New York law and somewhat more liberal than the California law, which does not permit abortion for fetal indications. In spite of this, proportionally California reported 17 times as many abortions in 1969 as Georgia did, and Bellevue Hospital in New York performed nine times as many abortions as Grady Memorial Hospital in Atlanta.

Differences in attitude may explain these regional variations. The 1965 National Fertility Study of married women showed that the least favorable attitudes toward abortion were found among "white Catholic women in the Midwest and the South. On the whole, women in the South are the most opposed to abortion."14 Physicians' attitudes reflect the same regional difference. In May 1969, Modern Medicine conducted a survey of U.S. physicians regarding their views on three sociomedical problems -- abortion being one of the three. Of the 27,741 physicians who answered the question, "Should abortion be available to any woman capable of giving legal consent upon her own request, to a competent physician?", 51.0 percent answered with an unqualified "yes." The two regions of the country with the highest percentage of physicians answering with an unqualified "yes" were the East (62.1 percent) and the Far West (61.9 . percent). The two regions of the country with the lowest percentage of physicians answering with an unqualified "yes" were the Southeast (40.4 percent) and the South Central (37.6 percent). 15 Thus it is likely that physicians' and patients' attitudes toward abortion may play as important a role as do recent legal changes in explaining regional differences in 1969 abortion practices.

VIII. INTERNATIONAL NOTES

The 1967 Abortion Act, which went into effect in England, Wales, and Scotland on April 27, 1968, permits a doctor to terminate a pregnancy if he and another doctor consider:

"a. That the continuance of the pregnancy would involve risk to the life of the pregnant woman, or of injury to the physical or mental health of the pregnant woman or any existing children of her family, greater than if the pregnancy were terminated; or

would suffer from such physical or mental abnormalities as to be seriously handicapped."16

In the first year after enactment of this law, 37,736 abortions were performed in England and Wales. Provisional live birth figures for this same period were 819,272, for a ratio of 46 abortions per 1,000 live births. This ratio is higher than the 27 abortions per 1,000 live births for the four states reporting in the United States in 1969 and compares with recent figures from Scandinavia as follows: Denmark (1968) 84 abortions per 1,000 live births, Sweden (1968) 100 abortions per 1,000 live births. Other countries had even higher ratios: Japan (1967)--387, Hungary (1965)--1,356, and Czechoslovakia (1965)--344.17

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Table 1

Hospital Abortion Ratios Selected Hospitals USA, 1969

	Bellevue (public)	Grady Memorial (public)	Johns Hopkins (mixed)	Los Angeles County (public)	University of New York (private)
Hospital abortions	57	31	1,178	560	110
Live births Hospital abortions/	1,261	5,7942	2,2843	10,231	1,547
1,000 live births	45	5	516	55	71

^{1.} July 1968 - June 1969

Table 2

Hospital Abortions by Indication Selected Hospitals USA, 1969

	Bell	evue		ady	Joh	ins 1		of Ne	ersity W York		Tota	
Indication Maternal mental	No.	%	No.	%	No.	. %		No.	%		No.	%
health Maternal physical	54	94.7	22	71.0	628	96.8		90	81.8		794	93.7
Risk of fetal	3	5.3	3	9.7	9	1.4		12	10.9	•	27	3.2
deformity		do es	(50)	9 00 1	8	1.2		8	7.3		16	1.9
Rape or incest		g) 60	6	19.4	2	0.3	las	Sept	- (200		8	0.9
Other		en en			2	0.3					2	0.2
Total	57	100.0	31	100.0	649	100.0	,	110	100.0		847	100.0

^{1.} July - December 1969



^{2.} Provisional 1969 figures

^{3.} Total births over 500 grams

of next of state

Table 3

Hospital Abortion Ratios Selected States USA, 1969

	California ¹	Colorado	Georgia	Maryland
Hospital abortions	9,169	946	168	2,1342
Live births Hospital abortions/	264,750	38,3713	87,323	68,407
1,000 live births	35	25	2	31

January - September 1969 July 1968 - June 1969

Table 4

Hospital Abortions by Indication Selected States USA, 1969

	Cali	fornia 1	Colorado			Geor	gia	Maryl	Land ²	Total	
Indication	No.	%	No.	%		No.	%	No.	%	No.	%
Maternal mental health	8,497	92.7	692	73.2		105	62.5	1,956	91.7	11,250	90.6
Maternal physical health Risk of fetal	257	2.8	93	9.8		24	14.3	119	5.6	493	4.0
deformity		E1 61	43	4.5		30	17.9	31	1.5	104	0.8
Rape or incest	415	4.5	78	8.2		9	5.4	15	0.7	517	4.2
Other	A.J.	L.	40	4.2				13	0.6	53	0.4
Total	9,169	100.0	946	100.0		168	100.0	2,134	100.0	12,417	100.0

^{1.} January - September 1969

¹⁹⁶⁸ live birth figures

^{4. 1968} births over 500 grams

^{2.} July 1968 - June 1969

Table 5

Hospital Abortions by Age
Selected States
USA, 1969

	Cali	fornia ¹	Col	orado		Ge	orgia	To	tal
Age	No.	%	No.	%		No.	%	No.	%
< 15	227	2.5	42	4.4		6	3.6	275	2.7
15 - 19	2,672	29.1	312	33.0		41	24.4	3,025	29.4
20 - 24	2,857	31.2	252	26.6		41	24.4	3,150	30.6
25 - 29	1,481	16.2	135	14.3		37	22.0	1,653	16.1
30 - 34	944	10.3	95	10.0	-	23	13.7	1,062	10.3
35 - 39	686	7.5	1	10 /		12	7.1	1	10.6
≥ 40	286	3.1	3 98	10.4		8	4.8	1,090	10.6
Unknown	16	0.2	12	1.3				28	0.3
Total	9,169	100.0	946	100.0		168	100.0	10,283	100.0
						*			

1. January - September 1969

Table 6

Hospital Abortions by Marital Status
Selected States
USA, 1969

	Cali	fornia 1	Col	orado	Geo	rgia	Total		
Marital Status	No.	%	No.	%	No.	%	No.	%	
Married	2,315	25.2	237	25.1	. 75	44.6	2,627	25.5	
Unmarried	6,805	74.2	629	66.5	93	55.4	7,527	73.2	
Unknown	49	0.5	80	8.5	w. e.	er 10	129	1.3	
Total	9,169	100.0	946	100.0	168	100.0	10,283	100.0	

1. January - September 1969

Comparison of State Abortion Laws Passed in 1966 - 1969* U.S.A.

Legal Indications												
State	Date of Passage	Life	Health	Physical Health	Mental Health	Fetal Deformity	Forcible	Statutory Rape	Incest	Maximum Week of Pregnancy	Physician	Residency (Months)
Arkansas	1969	1	1			1	1		1.		1.	/ (4)
California	1967			1.	1		1	1	1	√(20)	1	0 H
Colorado	1967	1	100	1	1	1	1	1	1	/(16)	1	
Delaware	1969	1	3.	. 1	1	- ✓	1		1	√(20)	1	√ (4)
Georgia	1968	1	1			1	. /	1		8	1	1
Kansas	1969	1		- /	. 1	1	1	1	1	•	1	8 1
Maryland	1968	1		1	1	1	1		1	√(26)	1	
Mississippi	1966	1					1	1				
New Mexico	1969	18		. /	1	1	1	1	1		1	7,527 129
North Carolina	1967	1	1			· /	1		1	4	1	√ (4)
Oregon	1969	1		1	1	1	1	1	1	/(150 days)	1	1

^{*} This summary is based on data contained in "Checklist of abortion laws in the United States" published by the Association for the Study of Abortion, Inc., 1969.

We wish to acknowledge the following individuals whose contributions have made this report possible:

Irvin M. Cushner, M.D., Director Center for Social Studies in Human Reproduction Johns Hopkins University School of Medicine

Mr. Don Davis, Chief Statistical Branch Colorado State Department of Public Health

Malcolm G. Freeman, M.D., Chief Division of Perinatal Pathology Grady Memorial Hospital

Vincent F. Guinee, M.D., Director Bureau of Preventable Diseases New York City Health Department

Daniel R. Mishell, M.D., Director Division of Reproductive Biology University of Southern California

Theodore A. Montgomery, M.D., Chief Preventive Medical Program California Department of Public Health

Albert K. Schoenbucher, M.D., Director Maternal Health Service * Georgia Department of Public Health

J. King B. E. Seegar, M.D., Chief Maternal and Family Planning Section Division of Maternal and Child Health Maryland State Department of Health

and several Epidemic Intelligence Service Officers.



1. Read "Questions & Answers" -- contains basic information about pro-life support for Restoration Bill on abbrtich and will enable you to approach legislators with a positive program, one that goes beyond urging them merely to restrict the present law.

Remaining information on sheets contain supplementary information. Most of this should be used in your approach to legislators, since it stresses the NEED FOR LAW TO PROTECT THE RIGHT TO LIFE OF THE UNBORN - THE LEGISLATORS MUST BE AWARE OF THEIR PROMINENT RESPONSIBILITY AND NOT ALLOW LIFE TO BE AT THE DISCRETION OF ANY OTHER INDIVIDUAL OR INDIVIDUALS. STRESS THEIR PROTECTION AS LAWMAKERS IS SOLICITED IN OPPOSING ANY TOTAL REPEAL ABORTION LAW SUCH AS CHRENSTEIN-LEICHTER (\$2175, A3164).

Included are statements from doctors; Supreme Court Decision; etc.

- 2. A. Before visiting each legislator, check his or her record on abortion issue. The key to this list is rather long and complex but that is because so much information is packed into the list itself; how each person voted on abortion last year, what kinds of positive or negative bills each one is sponsoring this year, how certain legislators answered various questionnaires about both issues, etc.
- B. Use a positive approach in addition to unging legislators to oppose strongly the total repeal abortion law urge them to work actively for passage of the Donovan-Crawford Bills or similar restoration bills.

If a legislator reacts favorably to one such restoration bill, and is not already sponsoring them, ask him or her to lend support by publicly endorsing the bill (s). Specifically, try to obtain the legislator's signature on one of the sheets enclosed. If you get a signature on said sheet (see place for Legislator's signature) return to the registration table. This will allow us to announce the growing support for Restoration Bill and here is where your lobbying can have concrete results toward the return of the regard for the sanctity for Human Life.

C. If a legislator is not available when you call, ask when you might be able to return later in the day. In the meantime, leave one of the "letters to legislators", with your name and address printed clearly on it. Then try to drop in again later in the afternoon. Additional letters will be available at the registration table. If it is your local legislator that you cannot get to see, you may want to try to make an appointment to see him or her later this week or on the weekend, in your home district.

WHOM TO VISIT AND WHAT TO SAY:

A. Your own Senator and Assembly Representative. Even if they already support the Restoration Bill, thank them and urge them to work hard for passage.

B. Key Committee heads (be sure to check their records too)

For Restoration of Abortion Law to save the life of woman only (in Codes
Committee.)

The state of the s

Senator Lombardi (46SD; rm 500-G) Chairman, Senate Health Committee.

Orge him to recommend the Restoration Bill S-2) and return dignity to man, recommend that said bill would clearly be in the act of law, protecting life -- their foremost duty.

Assemblyman DiCarlo (49AD; rm 437), Chairman, Assembly Codes Committee-he strongly opposes abortion. Urge him to report out of committee the only bill that will restore the sanctity of life and restore honor to our Capitol the Donovan-Crawford Restoration Bill.

Legislative deaders Urge them not to relinquish their primary role is lawmaker - to protect life - each life dependent on their proper lawmaking. They cannot allow any individual to weigh circumstances in determining who shall not have life. Law must remain for the protection of life - each life and only law may justly protect the innocent.

C. (contd.)

Senate Majority Leader Earl Brydgas (52 SD)
Senate Minority Leader Joseph Zaketzki (28 SD)
Assembly Speaker Perry Duryea (1 AD)
Assembly Majority Leader John Kingston (17 AD)
Assembly Minority Leader Stanley Steingut (41 AD)

- D. Members of key committees especially from your general geographic area: the Codes Committees; the Senate and Assembly -- Emphasize support for the Donovan-Crawford Bill to Codes members.
- Please fill out and return the <u>follow-up sheet</u> so that the information gathered can be shared among pro-life people, and do consider using the format the bottom of that sheet to join pro-life movement which will insure that future unborn infants shall have life, rightfully, legally, morally, theoretically theirs.

REMINDER:

If any legislator signs a statement of support for either or both of the restoration bills, BRING IT AT ONCE TO SENAMOR DONOVAN'S OFFICE, ROOM 517: promptness is very important:

4. Please register at Senator James Dorovar's office (Room 517) so that you will be sure to receive buttons and all information which will be useful in visiting legislators today.





THE WHITE HOUSE

STATEMENT BY THE PRESIDENT ON REPORT OF THE COMMISSION ON POPULATION GROWTH AND THE AMERICAN PUTURE

The Commission on Population Growth and the American Future by a formally presented its report to me today, thus ompleting its

two years of work.

The men and women on this panel have performed a valuable public service in identifying and examining a wife range of problems related to population, and have contributed to an emerging debate of great significance to the future of our Nation.

I wish to thank the able and energetic Chairman of the Commission, Mr. John D. Rockefeller III, for his tireless efforts not only on this Commission but in other capacities to focus the Nation's attention on these important issues.

The extensive public discussion already generated by this report clearly indicates the need to continue research in areas touching

on population growth and distribution.

While I do not plan to comment extensively on the contents and recommendations of the report, I do feel that it is important that the public know my views on some of the issues raised.

In particular, I want to reaffirm and reemphasize that I do not support unrestricted abortion policies. As I stated on April 3, 1971, when I revised abortion policies in military hospitals, I consider abortion an unacceptable form of population control. In my judgment, unrestricted abortion policies would deman human life. I also want to make it clear that I do not support the unrestricted distribution of family planning services and devices to minors. Such measures would do nothing to preserve and surengthen close family relationships.

I have a basic faith that the American paople themselves will make sound judgments regarding family size and frequency of births judgments that are conductive both to the public interest and to passonal family goals -- and I believe in the right of married.

oc plas to sale thans judgments for themselves.

While disagreeing with the general thrust of some of the Commission's recommendations, I wish to extend my thanks to the members of the Commission for their work and for having assembled much valuable information.

The findings and conclusions of the Commission should be great value in assisting governments at all levels to formula policy. At the Federal level, through our recent reorganization of the Executive Office of the President, we have the means through the Domestic Council and the Office of Management and Budget to follow up on the Commission's report. The recommendations of occommission will be taken into account as we formulate our national growth and population research policies and our agency budgets through these processes for the means about

Many of the questions raise by the report cannot be answered purely on the basis of fact, our sucher involve moral judgments about which reasonable men will disage. I have that the discussions ahead will be informed ones, so that we all will be better able to take a case passeous raising to consist of the full incollege.

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A COLUMN TO THE CASE OF THE

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Proceed Constitutional Amendment

Any protection given to the lives of unborn children from conception until birth by state or Federal laws in constitutional and shall not be declared invalid on grounds of privacy, vagueness, or for any other reason.

Explanation of the Amendment
The emendment is worded negatively. It does not in itself protect
unform children. What it says is that if a government chooses to
defend unborn children, then that protection is not unconstitutional.

The working of the amenament is subject to change. "From conception until birth" was specifically placed in the amendment to avoid the possibility that the phrase "unborn children" can be interpreted as applying only to a fetus of six or seven months. "Federal or state law" is specifically mentioned to avoid the possible ruling that only the Federal government can protect unborn children.

Questions:

Wouldn't a positive amendment be better - that is, an amendment which would say that unborn children are entitled to protection?

A positive amendment would certainly be preferable. Such an amendment has already been introduced in Congress, and we would support in preference to our own if it had a chance to be passed.

Remember, however, that a Constitutional Amendment requires a two-thirds vote in Congress and then a two-thirds vote in three-fourths of the state legislatures. With the present strength of the pre-abortion forces in communications and public relations, could we realistically expect such a vote for the pre-life position?

A positive amendment would almost cortainly meet such objections as - "What about the woman who is raped?" or "What about the woman who is suffering terribly because the believes her child will be deformed?" At this point, there might even be danger that a positive amendment would end up authorizing the killing of unborn children in certain circumstances.

A negative amendment avoids this problem. The person who believes that the unborn child should be protected at all times could vote for it without any abandonment of principle. At the same time, the person who believes the unborn child should be protected in some circumstances but not in others could vote for it, for what the amendment accomplished to give tack to the state ligislature; the power that until recent a cryone assumed they had - the power to pass laws protecting unborn a ulturen.

This amendment, then, is an attempt to unite behind one proposal all the people who do not want unrestricted aboution. (By the way, it says nothing about the constitutionality of laws which permit the destruction of the unborn. The grounds for a legal shallenge to permissive abortion based on the rights of the child would still exist.)

Those are the non-sponsors of House Bill #600. Jail each one. Jal i before each out of torm number. Tell each one to vote for House Ball #800 otherwise you will alort the Catholic parishes in their district and make known their hostility toward unborn pables. Tell them that this will surely get them voted down in the November election. Be firm at all times. Never let them detect a sympathetic note in your voice. They have done wrong by not spensoring the bill. They must correct this mistake Now!

anderson, Sarah 5H-8-0102 Barber, James GA-4-0829 Borkes, Milton 946-4224 Berson, Norman 752-4070 Butera, Robert 559-7921 Grawford, Patricia 647-1915 Dager, Charles 543-5444 or 699-5444 Dorsey, Joseph LU-6-2050 Fawcett, Charlotte WI-7-1550 Fineman, He rbert 985-1470 Gelfand, Rigene Lo-5-2255 Greenfield, Roland JN-3-4464 Johnson, Jool BA-6-2956 Katz, alvin RA-2-C916 Mebus, Charles TU-4-3700 or TU-4-4499 Melton, Mitchell PC-3-6309 Mifflin, Edward KI-4-6356 Morris, Danuel 384-8955 Pancoast, Sieber 489-7933

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These are the sponsors of House Bill 200. Call each one and congratulate them for sponsoring House Bill 200. Tell him that he has the majority of Pas voters behind him. Pledge your support and that of the Catholic communityin the upcoming election.

Beren, Caniel TU-7-6300 or WI-7-4550 or 385-0420 Braig, Joseph (unlisted) 5106 Grant Ave Phila, Pa. 19114 Ocner, Harry MI-4-0226 Coppolino, Matthew HO-2-4099 Doyle, Joseph Na2-5812 Gleeson, Francis MA-4-6049 Hamilton, John 14-3-5323 Johnson, Ceorge HI-9-5800 Kolly, anita Gr-2-9285 Ko ster. Stanley 4944554 Lederer, William Ga-6-7719 Lynch, Francis PC-5-2994 Lynch, Frank FL-2-7227 Mastrangelo, ndriano HO-2=6306 McClatchy, Michard LA-5-8651 Myers, Michael FU-9-7052 C'Donnell, James SA-6-1428 Pezak, John CU-8-6558 Rioger, william BA-9-6980 Rush, Francis Ge-8-7985 Shelton, Ulyases 20-3-6198 or Ja-3-9075

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